

1 AN ACT concerning health insurance coverage.

2 Be it enacted by the People of the State of Illinois,  
3 represented in the General Assembly:

4 Section 3. The Department of Insurance Law of the Civil  
5 Administrative Code of Illinois is amended by adding Section  
6 1405-35 as follows:

7 (20 ILCS 1405/1405-35 new)

8 Sec. 1405-35. Brain injury coverage study.

9 (a) The Department of Insurance shall conduct an  
10 analysis and study of costs and benefits derived from the  
11 implementation of the coverage requirements for treatment of  
12 brain injuries established under Section 356z.4 of the  
13 Illinois Insurance Code. The study shall cover the years  
14 2004, 2005, and 2006. The study shall include an analysis of  
15 the effect of the coverage requirements on the cost of  
16 insurance and health care, the results of the treatments to  
17 patients, any improvements in the care of patients, and any  
18 improvements in the quality of life of patients.

19 (b) The Department shall report the results of its study  
20 to the General Assembly and the Governor on or before March  
21 1, 2007.

22 Section 5. The State Employees Group Insurance Act of  
23 1971 is amended by changing Section 6.11 as follows:

24 (5 ILCS 375/6.11)

25 Sec. 6.11. Required health benefits; Illinois Insurance  
26 Code requirements. The program of health benefits shall  
27 provide the post-mastectomy care benefits required to be  
28 covered by a policy of accident and health insurance under  
29 Section 356t of the Illinois Insurance Code. The program of

1 health benefits shall provide the coverage required under  
 2 Sections 356u, 356w, 356x, and 356z.2, and 356z.4 of the  
 3 Illinois Insurance Code. The program of health benefits must  
 4 comply with Section 155.37 of the Illinois Insurance Code.  
 5 (Source: P.A. 92-440, eff. 8-17-01; 92-764, eff. 1-1-03.)

6 Section 10. The Counties Code is amended by changing  
 7 Section 5-1069.3 as follows:

8 (55 ILCS 5/5-1069.3)

9 Sec. 5-1069.3. Required health benefits. If a county,  
 10 including a home rule county, is a self-insurer for purposes  
 11 of providing health insurance coverage for its employees, the  
 12 coverage shall include coverage for the post-mastectomy care  
 13 benefits required to be covered by a policy of accident and  
 14 health insurance under Section 356t and the coverage required  
 15 under Sections 356u, 356w, and 356x, and 356z.4 of the  
 16 Illinois Insurance Code. The requirement that health  
 17 benefits be covered as provided in this Section is an  
 18 exclusive power and function of the State and is a denial and  
 19 limitation under Article VII, Section 6, subsection (h) of  
 20 the Illinois Constitution. A home rule county to which this  
 21 Section applies must comply with every provision of this  
 22 Section.

23 (Source: P.A. 90-7, eff. 6-10-97; 90-741, eff. 1-1-99.)

24 Section 15. The Illinois Municipal Code is amended by  
 25 changing Section 10-4-2.3 as follows:

26 (65 ILCS 5/10-4-2.3)

27 Sec. 10-4-2.3. Required health benefits. If a  
 28 municipality, including a home rule municipality, is a  
 29 self-insurer for purposes of providing health insurance  
 30 coverage for its employees, the coverage shall include

1 coverage for the post-mastectomy care benefits required to be  
 2 covered by a policy of accident and health insurance under  
 3 Section 356t and the coverage required under Sections 356u,  
 4 356w, and 356x, and 356z.4 of the Illinois Insurance Code.  
 5 The requirement that health benefits be covered as provided  
 6 in this is an exclusive power and function of the State and  
 7 is a denial and limitation under Article VII, Section 6,  
 8 subsection (h) of the Illinois Constitution. A home rule  
 9 municipality to which this Section applies must comply with  
 10 every provision of this Section.

11 (Source: P.A. 90-7, eff. 6-10-97; 90-741, eff. 1-1-99.)

12 Section 20. The Illinois Insurance Code is amended by  
 13 changing Section 351B-5 and adding Section 356z.4 as follows:

14 (215 ILCS 5/351B-5) (from Ch. 73, par. 963B-5)

15 Sec. 351B-5. Applicability of other Code provisions. All  
 16 policies of accident and health insurance issued under this  
 17 Article shall be subject to the provisions of Sections 356c,  
 18 subsection (a) of Section 356g, 356h, 356n, 356z.4, 367c,  
 19 367d, 370, 370a, and 370e of this Code.

20 (Source: P.A. 86-1407; 87-792; 87-1066.)

21 (215 ILCS 5/356z.4 new)

22 Sec. 356z.4. Coverage for certain benefits related to  
 23 brain injury.

24 (a) A group or individual policy of accident and health  
 25 insurance, a managed care plan, or multiple employer welfare  
 26 arrangement, that is amended, delivered, issued, or renewed  
 27 after the effective date of this amendatory Act of the 93rd  
 28 General Assembly may not exclude coverage for cognitive  
 29 rehabilitation therapy, cognitive communication therapy,  
 30 neurocognitive therapy and rehabilitation, neurobehavioral,  
 31 neurophysiological, neuropsychological, and

1 psychophysiological testing or treatment, neurofeedback  
2 therapy, remediation, post-acute transition services, or  
3 community reintegration services necessary as a result of and  
4 related to an acquired brain injury.

5 (b) Coverage required under this Section may be subject  
6 to deductibles, copayments, coinsurance, or annual or maximum  
7 payment limits that are consistent with deductibles,  
8 copayments, coinsurance, and annual or maximum payment limits  
9 applicable to other similar coverage under the policy.

10 (c) The Department shall adopt rules as necessary to  
11 implement this Section.

12 (d) This Section is inoperative after December 31, 2007.

13 Section 25. The Health Maintenance Organization Act is  
14 amended by changing Section 4-6.5 as follows:

15 (215 ILCS 125/4-6.5)

16 Sec. 4-6.5. Required health benefits; Illinois Insurance  
17 Code requirements. A health maintenance organization is  
18 subject to the provisions of Sections 155.37, 356t, 356u, and  
19 356z.1, and 356z.4 of the Illinois Insurance Code.

20 (Source: P.A. 92-130, eff. 7-20-01; 92-440, eff. 8-17-01;  
21 92-651, eff. 7-11-02.)

22 Section 30. The Voluntary Health Services Plans Act is  
23 amended by changing Section 10 as follows:

24 (215 ILCS 165/10) (from Ch. 32, par. 604)

25 Sec. 10. Application of Insurance Code provisions.  
26 Health services plan corporations and all persons interested  
27 therein or dealing therewith shall be subject to the  
28 provisions of Articles IIA and XII 1/2 and Sections 3.1, 133,  
29 140, 143, 143c, 149, 155.37, 354, 355.2, 356r, 356t, 356u,  
30 356v, 356w, 356x, 356y, 356z.1, 356z.2, 356z.4, 367.2, 368a,

1 401, 401.1, 402, 403, 403A, 408, 408.2, and 412, and  
2 paragraphs (7) and (15) of Section 367 of the Illinois  
3 Insurance Code.

4 (Source: P.A. 91-406, eff. 1-1-00; 91-549, eff. 8-14-99;  
5 91-605, eff. 12-14-99; 91-788, eff. 6-9-00; 92-130, eff.  
6 7-20-01; 92-440, eff. 8-17-01; 92-651, eff. 7-11-02; 92-764,  
7 eff. 1-1-03.)

8 Section 90. The State Mandates Act is amended by adding  
9 Section 8.27 as follows:

10 (30 ILCS 805/8.27 new)

11 Sec. 8.27. Exempt mandate. Notwithstanding Sections 6  
12 and 8 of this Act, no reimbursement by the State is required  
13 for the implementation of any mandate created by this  
14 amendatory Act of the 93rd General Assembly.